

IDENTIFICATION AND TRANSPORTATION FOR STUDENTS MCPASD TRANSITIONAL EDUCATION PROGRAM

If you have any questions or would like further information, please contact: Chris Mand, MCPASD School Social Worker, 826-7766

CONFIDENTIAL INFORMATION CURRENT LIVING SITUATION: ☐ UNACCOMPANIED YOUTH in a shelter with relatives or others due to lack of housing at a train or bus station, park, or in a car in a motel/hotel, camping ground, or other similar situation due to lack of alternative, adequate housing in an abandoned apartment or building ☐ Disaster victim? Explain_ other Notes: SECTION I – STUDENT/FAMILY INFORMATION Date: Name of Name and Relationship of **Main Contact Phone Number:** Parent(s)/Guardian(s): Person Staying With: Name of Educational Other/Email: Start date of Address (if non-household school: member): Guardian: Students in DOB Grade School School **Current Address:** Dates: Household: Contact: 1. Former Address(es): Dates: 3. SECTION II – INTRA SCHOOL DISTRICT INFORMATION School District of **School District of Origin:** School District Where Child(ren) are Attending/Served: Residence: Middleton-Cross Plains Area School District **Contact Date:** Person Contacted for Person Contacted as McKinney-Vento Liaison: **Billing Transportation:**



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SECTION III – ESTIMATED MONTHLY TRANSPORTATION COSTS Transportation Provided: Yes No	
TYPE OF TRANSPORTATION School Bus	
SECTION IV – CHECKLIST AND RESOURCES	
Reviewed the following with parent/guardian: McKinney-Vento Student Rights Immediate enrollment District of origin/residence Transportation Student information will be shared with the school district sharing transportation billing costs with MCPASD. Student information will be shared, confidentially, with Food Service, Registration, Transportation Department personnel, building social worker and building principal This document will not be part of the student's cumulative file. YES, I release my free lunch status for possible school fee reduction to authorized school personnel, including Lunch Express, Business Services, School Social Worker, and authorized technology personnel.	□ Community Resources: □ Food and Clothing □ Affordable Permanent Housing □ Emergency Shelter □ Mental Health Services □ Employment □ Domestic Abuse Resources □ Medical, Dental and Other Health Services □ Seasonal □ Current Order of Protection or No Contact Order □ Current Affidavit on file □ Transportation □ Other Specify: □ Other Specify:
Date/time shared with parent/guardian:	